

APPLICATION FOR UNITED STATES PATE

Declaration and Power of Attorney

My residence, post office address and citizenship are as stated below next to my name: that

I verily believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if olural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled;1

SPARK GAP DEVICE FOR HIGH-POWER ELECTRICAL GENERATORS

described and claimed in the specification: Check one

*a. [] attached hereto.

b. [x] filed on November 16, 2001 as Application Serial No. 09/988,016 and amended on

(if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information of which I am aware which is material to the examination of this application in accordance with Title 37. Code of Federal Regulations, §1.56(a). Under Title 35 U.S. Code §119, the priority benefits of the following foreign application(s) filed within one year prior to this application are hereby claimed:

French Patent Application No. 00 14764 filed November 16, 2000.

The following applications for patent or inventor's certificate on this invention were filed in countries foreign to the United States of American either (a) more than one year prior to this application, or (b) before the filing date of the above-named foreign priority application(s):

2 If there are no corresponding applications.

insert "NONE".

I hereby appoint the following as my attorneys of record with full power of substitution and revocation to prosecute this application and to transact all business in the Patent Office:

Roger W. Parkhurst, Reg. No. 25,177; and/or Charles A. Wendel, Reg. No. 24,453.

ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD BE SENT TO PARKHURST & WENDEL, L.L.P., 1421 Prince Street, Suite 210, Alexandria, Virginia 22314-2805 Telephone: (703) 739-0220.

I hereby declare that I have reviewed and understand the contents of this Declaration, and that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

3 Typewritten Full Name Sole or First Inventor	of	f Philippe		MONJAUX	
DOIC OF THAT INVENTOR		Given Name	Mıddle Initial	Family Name	
*4 Inventor's Signature	168°	Med			
5 Date of Signature	ESF	3 03	25	2002	
		Month	Day	Year	
6 Residence	Gramat			France	
	City	State or Province		Country	
7 Citizenship	French			-	
8 Post Office Address		rue Pierre de Coubertin			
(Insert complete		46500 GRAMA	T FRANCE		

^{*}This form may be executed only when attached to the specification (including claims) at the end thereof if Box a. is checked.

^{**}Note to the Inventor. Please sign name on line 4 exactly as it appears in line 3 and insert the actual date of signing on line 5.